UNITED STATES DISTRICT COURT

for the

Western District of New York

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

22CV6483 Case No.

(to be filled in by the Clerk's Office)

JURY TRIAL: Yes X No___



COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

State

Zip Code

(Rev. 01/21) Complaint for Violation of Civil Rights (Prisoner)

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for needed.	each plaintiff named in the complaint. Attach additional pages if
Name	Ernest King
All other names by which	
you have been known:	
ID Number	18A2340
Current Institution	Attica Correctional tacilite
Address	Affica New YORK
	Attica william

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s)

City

the person's job or title (if known) and	check whether you are bringing this complaint against them in their ity, or both. Attach additional pages if needed.
Defendant No. 1 Name Job or Title (if known) Shield Number Employer Address	MEDAN GRAVES DAY I TRC THE POINTS CORRECTIONAL Facility State route 96 DD. BOX 119 City State Zip Code Individual capacity Official capacity
Defendant No. 2 Name Job or Title (if known) Shield Number Employer Address	mandis Shultz The Points Correctional facility State route 96 9.0 Bok 119 Ramulus Lay 14541 State Zip Code [Individual capacity Official capacity

(Rev. 01	/21) Comp	laint for Violation of Civil Rights	Prisoner)			
		Defendant No. 3 Name Job or Title (if known Shield Number Employer Address	vn)	Patrick SGT THA Five Points Co State route 91 Romulus City Individual capacity	proclimal for P.O Box 119 State Official capacity	icility 4541 Zip Code
				1		
		Defendant No. 4 Name Job or Title (if known Shield Number Employer Address	vn)			
				City	State	Žip Čode
				Individual capacity	Official capacity	
п.	Basis	for Jurisdiction				
	Under 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." Under Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights. A. Are you bringing suit against (check all that apply):					ned Agents of
		Federal officials (a Bivens claim)				
State or local officials (a § 1983 claim)						
	B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secure the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local official				1983, what	
		18+ 14	th s	8th Amer	dment	
	C.			only recover for the violation tutional right(s) do you clain		

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V.

VI.

C.	What date and approximate time did the events giving rise to your claim(s) occur?
	Aug 3, Oct 5th, oct 19, Sep 3 10.17.9.22.10
D.	What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?
	Was anyone else involved? Who else saw what happened?) I Dut in a grievance stated my claim indicated the
	wrong that was occurring prison officials did
	notherate try to fix it the improper procedure
	cause Helays and fail to oversee the people who
	procedures that are proporing
Inju	nries
	ou sustained injuries related to the events alleged above, describe your injuries and state what medical
trea	ment, if any, you required and did or did not receive.
	Bestalinguis Englisons. Estagni lation
	034chological torture
	increase in medication
Reli	ef
If re	e briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes, questing money damages, include the amounts of any actual damages and/or punitive damages claimed for acts alleged. Explain the basis for these claims.
	allitie.
	Hundred thousand dollars
	100,000,00
	, ,

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the exents giving rise to your claim(s). HILL COLLEGE POPOLICY COMMUNICATION OF THE
B.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes
	No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes
	No
	Do not know
	If yes, which claim(s)?
	P NOT THE PORT OF

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?			
`	Yes			
	☐ No			
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?			
	Yes			
	□ No			
E.	If you did file a grievance:			
	1. Where did you file the grievance? FIXE POINTS CF STATE WATE 96 POROXIVE POMULUS 154 14541			
	2. What did you claim in your grievance? I Stated my lawyet put in a for! For my Darole document and they			
	didnot release them to him			
	3. What was the result, if any? They responded and said they review the result, and they indicate that			
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)			
	I disagree with IGRC			
	response and I appeal			
	to the superintendent			
	and she also denied my			
	ADDRAL DO 10.20.22			

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F.	If you	did not	file a	grievance:
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1. If there are any reasons why you did not file a grievance, state them here:

K/A

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

Wrote letter to outside agen

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility. brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

Yes

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in action?				
		Yes		
	X	No		
В.		rour answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is re than one lawsuit, describe the additional lawsuits on another page, using the same format.)		
	1.	Parties to the previous lawsuit		
		Plaintiff(s)		
		Defendant(s)		
	2.	Court (if federal court, name the district; if state court, name the county and State)		
	3.	Docket or index number		
	4.	Name of Judge assigned to your case		
	5.	Approximate date of filing lawsuit		
	6.	Is the case still pending?		
		Yes		
		☐ No		
		If no, give the approximate date of disposition.		
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)		

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

For Parties Without an Attorney A.

	I agree to provide the Clerk's Office with any changes to my address where case-related papers ma served. I understand that my failure to keep a current address on file with the Clerk's Office may re in the dismissal of my case.	.y esi
	Date of signing: H.D.23	
	Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address Attica Correctional facture State State State State State Signature of Plaintiff Printed Name of Plaintiff Prison Address Attica State State	
В.	For Attorneys	
	Date of signing:	
	Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address	
	City State Zip Code Telephone Number E-mail Address	